## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10792 22y

| CLAIMS AS FILED - PART I  |  |   |                |                                    |              |                  |      | SMALL ENTITY       |                        |            | OTHER THAN          |                        |  |
|---|--|---|----------------|------------------------------------|--------------|------------------|------|--------------------|------------------------|------------|---------------------|------------------------|--|
| T   | OTAL CLAIMS                                    | <u> </u>                                  | (Column 1)     |                                    | COIL         | (Column 2)       |      | TYPE               |                        | OR<br>•    |                     |                        |  |
| TOTAL OBAIMO  |  |   | 14             |                                    | ·            | ·                |      | RATE               | FEE                    | ╛          | RATE                | FEE                    |  |
| FOR   |  |   | NUMBER FILED   |                                    | NUME         | BER EXTRA        |      | BASIC FEI          | 385.00                 | OR         | BASIC FEE           | 770.00                 |  |
| TOTAL CHARGEABLE CLAIMS   |  |   | 14 minus 20= * |                                    |              |                  |      | X\$ 9=             |                        | OR         | X\$18=              |                        |  |
| INDEPENDENT CLAIMS  |  |   | minus 3 =      |                                    |              |                  |      | X43=               |                        | OR         | X86=                |                        |  |
| MU  | JLTIPLE DEPEI                                  | NDENT CLAIM P                             | RESENT<br>     |                                    |              |                  |      | +145=              |                        | OR         | +290=               |                        |  |
| * If  | the difference                                 | e in column 1 is                          | less than ze   | ero, enter                         | "0" in c     | column 2         | ı    | TOTAL              |                        | OR         | TOTAL               | · ·                    |  |
| CLAIMS AS AMENDED - PART II   |  |   |                |                                    |              |                  |      |                    | <del></del>            | 4          | OTHER               | THAN                   |  |
|   |  | (Column 1)                                | (Column 2)     |                                    |              | (Column 3)       |      | SMALL              | ENTITY                 | OR         | SMALL               |                        |  |
| AMENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                | HIGHI<br>NUME<br>PREVIO<br>PAID F  | BER<br>OUSLY | PRESENT<br>EXTRA |      | RATE               | ADDI-<br>TIONAL<br>FEE |            | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | *   | Minus          | **                                 |              | =                |      | X\$ 9= .           |                        | OR         | X\$18=              |                        |  |
|   | Independent                                    | *   | Minus          | ***                                |              | =                |      | X43=               |                        | OR         | X86=                |                        |  |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                |                                    |              |                  |      |                    |                        | OR         | +290=               | ,                      |  |
|   |  |   |                |                                    |              |                  |      | TOTAL              |                        | OR         | TOTAL               |                        |  |
|   |  | F   | NDDIT. FEE     | l                                  | JO.,         | ADDIT. FEE       |      |                    |                        |            |                     |                        |  |
|   |  | (Column 1) CLAIMS                         | i i            | (Colum                             |              | (Column 3)       | lr   |                    | ADDI-                  | ı .        |                     | ADDI-                  |  |
| AMENDMENT B   |  | REMAINING<br>AFTER<br>AMENDMENT           |                | NUME<br>PREVIO<br>PAID F           | USLY         | PRESENT<br>EXTRA |      | RATE               | TIONAL                 |            | RATE                | TIONAL<br>FEE          |  |
|   | Total  | *   | Minus          | **                                 |              | = :              |      | X\$ 9=             |                        | OR         | X\$18=              |                        |  |
|   | Independent                                    | *   | Minus          | ***                                |              | =                |      | X43=               | ·                      | OR         | X86=                |                        |  |
|   | FIRST PRESE                                    | NTATION OF ML                             | ILTIPLE DEP    | ENDENT                             | CLAIM        |                  | -    |                    |                        | υ <b>Λ</b> |                     |                        |  |
|   |  |   |                |                                    |              |                  |      | +145=              |                        | OR         | +290=               | •                      |  |
|   |  |   |                |                                    |              |                  |      | TOTAL<br>DDIT. FEE |                        | OR         | TOTAL<br>ADDIT. FEE |                        |  |
|   |  | (Column 1)                                |                | (Colum                             |              | (Column 3)       |      |                    |                        |            |                     | •                      |  |
| AMENDMENT C   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                | HIGHE<br>NUMB<br>PREVIOU<br>PAID F | ER :         | PRESENT<br>EXTRA |      | RATE               | ADDI-<br>TIONAL<br>FEE |            | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | *   | Minus          | **                                 |              | =                |      | X\$ 9=             |                        | OR         | X\$18=              |                        |  |
|   | Independent                                    | *   | Minus          | ***                                |              | =                | 上    | X43=               |                        | .          | X86=                |                        |  |
| `   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                |                                    |              |                  |      | <del></del>        |                        | OR         | 7,00-               |                        |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |  |   |                |                                    |              |                  |      | +145=              |                        | OR         | +290=               |                        |  |
| H   | f the "Highest Nur                             | mber Previously Pa<br>mber Previously Pa  | id For IN THIS | SPACE is                           | less than    | 20, enter *20.*  | · AI | TOTAL<br>DDIT. FEE |                        | OR A       | TOTAL<br>DDIT. FEE  |                        |  |
| 1   | he *Highest Num                                | ber Previously Paid                       | For" (Total or | Independer                         | nt) is the   | highest number   | foun | d in the app       | ropriate box           | in colu    | ımn 1.              | · ]                    |  |